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ISA THORIN

	APPLICATION NO.	FILING DATE			December 15th 20	
-			TOTAL C	LAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
	09/076,022	05/11/98	023	FRECH, K	28	76 09/15/00
	st Named GOMAN,	·	35	USC 154(b)	term ext. = 0	Days.

TITLE OF SMART CARD PERSOANLIZATION IN A MULTISTATION ENVIRONMENT

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ATTY'S DOCKET NO.	· CLASS-SUBCLASS .	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
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1. Change of correspondence address Use of PTO form(s) and Customer N Change of correspondence addre PTO/SB/122) attached. "Fee Address" indication (or "Fee	(1) the names of attorneys or age; the name of a member a regist and the names of attorneys or agen	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. Schwegman, Lunciberg, Weessner & Klufh, P.A. 2				
(B) RESIDENCE: (CITY & STATE C Minr Please check the appropriate assign	e is identified below, no assign propriate when an assignment or separate cover. Completion Incorporated R COUNTRY)	on the patent. y submitted to a substitue for	O Klesus Esa			
(Authorized Signature) NOTE; The Issue Fee will not be accepted agent; or the assignee or other party trademark Office. Burden Hour Statement: This form	dys (35, 63) oted from anyone other than the rin interest as shown by the re	(Date) 12/ 12/ 12/ 12/ 12/ 12/ 12/ 13/ 14/ 15/ 16/ 16/ 16/ 17/ 16/ 16/ 16/ 16/ 16/ 16/ 16/ 16/ 16/ 16	ered attorney and		GAW2 00000099 09	076022
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